

Down Payment Assistance Program APPLICATION

Housing & Neighborhoods Division

3900 Main Street, 2nd Floor Riverside, CA 92522 (951) 826-5879

Facsimile: (951) 826-2233 mdavis@riversideca.gov

Created: October 30, 2009

CITY OF RIVERSIDE DOWN PAYMENT ASSISTANCE PROGRAM APPLICATION CHECKLIST

All applications must be typed or printed neatly. All forms should be filled out completely. Make sure applications are signed, and notarized, where required. <u>Incomplete applications will not be accepted</u>. All items must be included in initial submittal - faxes will not be accepted for the Reservation Phase. Reservations that are missing any required items or contain white-out will not be processed and will be returned to the Lender.

The DPA Program uses a three-phase process: pre-approval, request for funding, and closing. The items required for each phase are as follows:

Part I. The following items are required in order to reserve funds for a specific borrower. DPA Reservations

are accepted on a first come, first served basis. The DPA Program Administrator will review the following items according to the DPA Program Manual guidelines and respond to any reservation request within ten (10) working days. Cover Letter indicating mortgage company name and address, contact person, phone and fax numbers, email address, name of applicant, location (address) of home and any other information regarding the loan terms and/or homebuyers Copy of applicant(s) drivers' license and social security card Application Processing Fee of \$100 from buyer's funds made payable to the City of Riverside. If the application is denied, the \$100 fee will be refunded to the applicant. Down Payment Assistance Reservation (DPA -1) with original, wet signature Certification of Applicant (DPA-2) with original, wet signature Down Payment Assistance Program Financing Worksheet (DPA-3) with original, wet signature Income Affidavit (DPA-4) – (if applicable) with original, wet signature Last three (3) years of federal tax returns (all pages and schedules) and W-2s PLEASE NOTE: For each year of tax returns submitted the statement "This is a true and exact copy of the tax returns submitted to the IRS" must be added to each tax return with the applicant's original, wet signature next to the statement. A minimum of 30 days paycheck stubs and/or documentation for other household income (ex. Social Security, disability payments, pension, child support, alimony, self-employment, bonuses, and other income where applicable) Last 3 month's of bank statements and any other statements showing the required down payment from the borrowers own funds (3%) Copy of tri-merged credit report with credit scores Copy of Fully Completed and Signed Loan Application Copy of the Good Faith Estimate signed by the buyer(s) DU/LP Underwriting Findings or Lender's approval letter

CITY OF RIVERSIDE DOWN PAYMENT ASSISTANCE PROGRAM

RESERVATION COVER LETTER

(Lenders should use this form or provide their own cover letter containing all of the following information.)

Date Submitted:			
Lender Submitting	DPA Reservation:		
(Contact Person:		
A	Address:		
7	Гelephone:	Fax :	
(Cell Phone:		
I	E-mail Address:		
Applicant Informati	ion:		
A	Applicant's Name:		
N	Mailing Address:		
7	Γelephone Number:		
(Cell Number:		
I	Email Address:		
Special Comments or	Notes:		
-			-

CITY OF RIVERSIDE, DEVELOPMENT DEPARTMENT HOUSING & NEIGHBORHOODS DIVISION

HOUSING & NEIGHBORHOODS DIVISION
3900 Main Street, 2nd Floor
Riverside, CA 92522
(951) 826-5879
Down Payment Assistance Program

Reservation

Lender:			
Lender Address:			
Lender Telephone: En	nail Address:		
Name of Authorized	!		
Lender Representative:			
Are you on the list of Yes No – If	the answer is "no"	you will not b	e able to
	pare an application	•	
submit application?:			
Cell Number:			
We are processing a mortgage loan application for treview indicates that this household meets the eligibit Assistance Program as set forth in the Program Guidelia. The following applicant(s) are requesting Down Payme	lity for First-Tim nes established by	the City of Ri	Down Paymen
Name of Applicant(s):			
Current Address:			
Applicant's Work- Phone Number:			
Applicant's Home/cell Phone Number:			
Gross Annual Household Income:		Monthly Income:	
Household Size:			
Down Payment Assistance Requested *Level I - Cannot exceed 25% of the purchase price *Level II - Cannot exceed \$50,000)	\$		
Is applicant applying for the Riverside County Mortgag Yes No	e Credit Certifica	te Program?	
Is the applicant a participant in the Riverside County H (FSS) Program? Yes No	ousing Authority	Family Self Su	fficiency
Is the household income within the Program Limits?	☐ Yes ☐	No	

Status of Prior Home Ownership:	
First Time Home Buyer Last Date of Home Ownership:	_
Citizenship Status	
Applicant 1: US Citizen Qualified Alien	
☐ Neither (Applicant does not qualify)	
Applicant 2: US Citizen Qualified Alien Neither (Applicant does not qualify)	
Applicant 3: US Citizen Qualified Alien Neither (Applicant does not qualify)	
Applicant 4: US Citizen Qualified Alien Neither (Applicant does not qualify)	

Applicant Information	
(For Statistical Purposes Only)	Marital Status: Family Size Married
Age of applicant(s) and all househouse (Please use the letter "H" to sign member)	old members: ify head of household, and the letter "X" for each family
Under 20 36-4	0 Head of Household:
20-25 41-5	0 Male
26-30 51-6	0 Female \square
31-35 Over	r 61
Hispanic: Yes No Race: Black or African Amer Native Hawaiian/Pacific American Indian/Alask Asian and White Black/African America American Indian/Alask American Indian/Alask Other	rican
Printed Auth Title: Address Telephone (Lender Signature: norized Lender Name:

City of Riverside, Development Department Housing & Neighborhoods Division 3900 Main Street, 2nd Floor Riverside, CA 92522 951-826-5879

Certification of Applicant

- 1) The undersigned, has applied for Down Payment Assistance from the City of Riverside Development Department Housing & Neighborhoods Division, hereinafter referred to as H&N, in conjunction with the Down Payment Assistance Program (DPA) Program, and hereby acknowledges and understands the following:
 - a) The DPA Program is to be used in conjunction with a mortgage loan for the purchase of a single-family residence, which is required to be used as your principal residence within sixty (60) days after the closing of the mortgage loan. The home shall not be used as a business or as a vacation (second) home.
 - b) The decision to grant the first mortgage loan is completely within the discretion of the mortgage lender to whom you have applied. H&N makes no decision in regard to the approval of any first mortgage loan.
 - c) The decision to fund Down Payment Assistance is within the sole discretion of the H&N, and is dependent upon your application meeting all requirements of the City of Riverside's Down Payment Assistance Program, as well as the availability of funds.
 - d) The decision of which home to buy is within the sole discretion of the buyer and the buyer understands that Down Payment Assistance is not limited to specific homes. The buyer has performed their investigation of the home market, and has independently selected a home to purchase.
 - e) The buyers shall satisfy themselves as to the condition of the home prior to closing escrow. The buyer shall confirm that requested repairs are complete prior to close of escrow, and that all systems are operating properly. H&N shall not be responsible for any repairs to the home at any time.
 - f) The buyers understand that they shall attend an 8 hour Homebuyer Education Course as soon as possible in the purchase process. Down Payment Assistance funds will not be released until the buyer has attended this course. To schedule the Homebuyer Education Course, please contact Fair Housing Council of Riverside County at (800) 655-1812 or Neighborhood Housing Service at (951) 300-1757. Other HUD approved providers certificates are acceptable.



Listed below are the names of all persons who intend to reside in the residence and include the income of all adults age 18 and older:

You certify the following as listed above:

Name	Relation to Head of Household	Age	Social Security Number	Employer/Source of Income	Annual Income
					\$
					\$
					\$
					\$
					\$
					\$
				TOTAL	\$
The total household gross The number of family me		me is:	\$	•	

- 2) You certify that you have not had a previous ownership interest in a principal residence during the last three (3) years. Down Payment Assistance will <u>not</u> be granted if you have had a previous ownership interest in a principal residence during the last three (3) years. In connection with the requirement listed above, you will be required to submit copies of your previous three (3) years federal income tax returns, and if unavailable, you will cooperate with the lender to submit alternative documentation acceptable to the lender and the City of Riverside.
- 3) You certify that you have provided to the lender all required information to enable lender to determine your total income and assets.
- 4) You acknowledge that a material misstatement **negligently** made in any statement by you in connection with an application for Down Payment Assistance will constitute a violation of law punishable by a fine; and a material misstatement **fraudulently** made by you will constitute a violation of law punishable by a fine and a revocation of the Down Payment Assistance, in addition to any criminal penalty imposed by law.



5)	If the loan is approved the buyer's vesting on the property will be:	
6)	By affixing your signature to this document, you acknowledge that you have understand all of the elements as indicated, and give your consent to procee application for Down Payment Assistance through the City of Riverside.	
	Date:	
	Signature of Applicant	
	Printed Name:	
	Signature of Applicant	
	Printed Name:	
	Signature of Applicant	
	Printed Name:	
	Signature of Applicant	
	Printed Name:	
	Name of Participating Lender:	_
	Signature of Authorized Lender Representative	-
	Printed Name:	_
	Title:	_

PLEASE SUBMIT ORIGINAL TO H&N STAFF AND GIVE THE BORROWERS A COPY OF THIS FORM



FINANCING WORKSHEET

City of Riverside, Development Department Housing & Neighborhoods Division 3900 Main Street, 2nd Floor Riverside, CA 9222 (951) 826-5879

Down Payment Assistance Program Financing Worksheet

BUYER NAME:			
4. DUDCHASE DDICE (must not exceed \$250,000). (May, Calca Limit).	4		
1. PURCHASE PRICE (must not exceed \$250,000) = (Max. Sales Limit):	1 2		
2. Down Payment Assistance Requested:	2		
FINANCING:			
3. First Trust Deed Amount:	3		
4. DPA Loan Amount:	4		
5. Funding from Other Assistance Programs	5		
6. Total Funding (add lines 3, 4 and 5)	6	\$ -	
The next sections will show the details of the above listed totals.			
Please complete the following, giving best estimate and matching Good Faith Estimate (GFE) figures:			
7. First Mortgage, Interest Rate:	7		%
8. First Mortgage Loan Type (FHA, VA, Cal-HFA, etc.):	8		/0
9. Term of Loan (30-yr. Ioan, CalHFA 35-yr. Ioan, or CalHFA 40-yr. Ioan):	9		
o. Tomi of Louis (Go yi. Tour, Guilli 77 To yi. Tour).	Ü		
1st TRUST DEED:			
10. Base 1st Mortgage Amount	10		
11. Additional Amount Financed (PMI, funding fees, etc.)	11		
12. First Trust Deed Total (add lines 10 and 11; total should match line 3)	12	\$ -	
DOWN PAYMENT:			
13. Down payment from Buyer	13		
14. Down payment from Other Ass't Programs (List other Programs & Amounts on pg. 2)	14		
15. Down payment from DPA Program *	15		
16. Total Down Payment (add lines 13, 14 and 15; must match GFE)	16	\$ -	
CLOSING COSTS:	47		
17. Closing Costs Paid by <u>Buyer</u>	17		
18. Closing Costs Paid by <u>Seller</u>	18 19		
19. Closing Costs financed in Loan (PMI, etc.)20. Closing Costs Paid by other Ass't Programs (List other Programs & Amounts on pg. 2)	20		
20. Closing Costs Faid by other Ass t Programs (List other Programs & Amounts on pg. 2) 21. Total Closing Costs (add lines 17 thru 20; must match GFE)	20 21	\$ -	
* Line 15 is for Level I – up to 25% of the purchase price, must be at least \$1,000 and Level II cannot exce		·	
		.,	
LENDER CERTIFICATION			
The amounts above indicate my best possible estimate at this time.			
(Lender Signature)		(Date)	

October 2009

FINANCING WORKSHEET

ALL ASSISTANCE PROGRAMS: (including the DPA)

2nd POSITION NAME OF PROGRAM: Loan or Grant: CITY/COUNTY/STATE:	DPA Loan Riverside, Riverside, CA	AMOUNT	(Dollar Amount) PORTION TOWARD DOWN PAYMENT	(Dollar Amount) PORTION TOWARD CLOSING COSTS:
3rd POSITION NAME OF PROGRAM:				
Loan or Grant:				
CITY/COUNTY/STATE:				
4th POSITION				
NAME OF PROGRAM:				
Loan or Grant:				
CITY/COUNTY/STATE:				
Fil BOOITION				
5th POSITION NAME OF PROGRAM:				
NAME OF FROOKAM.		_		
Loan or Grant:				
CITY/COUNTY/STATE:				
au Doorman				
6th POSITION				
NAME OF PROGRAM:		_		
Loan or Grant:				
CITY/COUNTY/STATE:				
	TOTAL:	\$ -	\$ -	\$ 0.00
LENDER CERTIFICATION				_ * 0.00
(Lender Signature)			(Date)	
(Lender Name)		– Page 2 of 3		



MC	TNC	н١١	/ IN	റവ	MЕ·

		Base Income	Other	Income ((Overtime,	Bonuses, Co	mmission	s, etc.)	
Applicant #1	1a		1b						
Applicant #1	ıa		10						
Applicant #2	2a		2b						
							!		
Applicant #3	3a		3b						
							•		
Applicant #4	4a		4b						
	TOTA	AL MONTHLY INCOME:							
5. BASE INCOME (add	lines '	1a, 2a, 3a and 4a)				5	\$	<u>-</u>]
6. OTHER INCOME (ad	d lines	s 1b, 2b, 3b and 4b)				6	\$	-	
									_
7. ASSET INCOME						7			
8. TOTAL INCOME (add	d lines	5, 6 and 7)				8	\$	-	
Ratios: Please include	the M	ICC credit in calculating the rati	os, if receivir	ng the MO	CC credit.				
Proposed Monthly Pay	ment:	s							
. ropossa menany r ay		ower's Primary Residence							
		tract the MCC credit from the Mon	thly Housing E	Expense)					
9. First Mortgage P & I	(<u>30-y</u>	ear or CalHFA 40-year only):				9			
		year (CalHFA 35-year loan only):				10			
11. Second Mortgage P	& I (if	applicable):				11			
12. Hazard Insurance:						12			
13. Taxes:						13			
14. Mortgage Insurance						14			
15. HOA Fees:						15			
16. Other:						16			
17. Primary Housing E	xpens	se (add lines 9 thru 16):				17	\$	-	_
18. Monthly MCC Credit	Amou	unt:				18	\$	-	
19. Total Primary Hous	ing E	xp. (add lines 17-18):				19	\$	-	
Monthly Housing Expe	ense								_
20. Total Primary Housi	ng Exp	pense (from line 19)				20	\$	-	
Monthly Household Inc	come								_
21. Total Gross Monthly	Incon	ne (from line 8)				21	\$	<u>-</u>	
22. Front End Ratio "Ho	using	Ratio" (line 19 divided by line 21)				22		#DIV/0!	9
LENDER CERTIFICATION	ON							Front end ratio minimum: 28% Front end ratio maximum: 35%	
(Lender Signature)				(Date)					

(Lender Name)



City of Riverside, Development Department Housing & Neighborhoods Division 3900 Main Street, 2nd Floor Riverside, CA 92522 951-826-5879

Income Affidavit (must attach a copy of the signed IRS Form 4506-T)

1. I (We) hereby certify that I (w Income Tax Return for the follow	· · · · · · · · · · · · · · · · · · ·	
NO INCOME:		
OTHER:		
 I (We) acknowledge and understand of determining my (our) eligh acknowledge that a material mis (us) in connection with an applicate federal violation punishable by a in any statement by me (us) in Assistance will constitute a federal Assistance received, which will be determined. In addition, I (we) hereby ack including false statement or representation, article or other valuable of Riverside program is punishable. 	statement <u>negligently</u> made in a statement <u>negligently</u> made in a statement for Down Payment assistation for Down Payment assistation; and a material misstateme connection with an application al violation punishable by a fine e in addition to any criminal pentanowledge and understand that resentation, or the fraudulent us thing or service pursuant to part	any statement by me ance will constitute a nt <u>fraudulently</u> made for Down Payment and repayment of all alty imposed by law.
Signature of applicant	Printed Name	Date
Signature of applicant	Printed Name	Date
Signature of applicant	Printed Name	Date



EMPLOYMENT AND INCOME INFORMATION

Le	ngth of Employment:
State:	Zip Code:
Monthly Gro	oss Income:
Le	ength of Employment:
State:	Zip Code:
Monthly Gro	oss Income:
and child supp	oort):
Le	ngth of Employment:
State:	Zip Code:
	State: Le State: Le State: Monthly Gro



Phone Number: () \$	Monthly Gross Income:			
Previous Employer:	Length of Employment:			
Address:				
City:	State: Zip Code:			
Phone Number: ()	Monthly Gross Income:			
Other income (include pension plans, annuitie	es and child support):			



EMPLOYMENT AND INCOME INFORMATION

Employer:	Length of Employment:			
Address:				
City:	State: Zip Code:			
Phone Number: ()	Monthly Gross Income: \$			
Previous Employer:	Length of Employment:			
Address:				
City:	State: Zip Code:			
Phone Number: ()	Monthly Gross Income: \$			
Other income (include pension pla	ans, annuities and child support):			
	ans, annutices and crine support).			
Co-Applicant: Employer:	Length of Employment: _			
Co-Applicant: Employer: Address:				
Co-Applicant: Employer: Address:	Length of Employment: _			
Co-Applicant: Employer: Address: City: Phone Number: ()	Length of Employment: State: Zip Code:			
Co-Applicant: Employer: Address: City: Phone Number: ()	Length of Employment: State: Zip Code: Monthly Gross Income: \$ Length of Employment:			
Co-Applicant: Employer: Address: City: Phone Number: () Previous Employer: Address:	Length of Employment: State: Zip Code: Monthly Gross Income: \$ Length of Employment:			
Co-Applicant: Employer: Address: City: Phone Number: () Previous Employer: Address:	Length of Employment: State: Zip Code: Monthly Gross Income: \$ Length of Employment:			



INCOME VERIFICATION AUTHORIZATION

Applicants to Complete: I hereby grant my employer permission to disclose my income to the City of Riverside in order that they may determine my income eligibility for the Down Payment Assistance Program. **Applicant Name (Please Print) Applicant Signature Date** Name and Address of Employer: **Co-Applicant Name (Please Print) Co-Applicant Signature Date** Name and Address of Employer:



INCOME VERIFICATION (For Employers Only)

To Whom It May Concern:

The undersigned has applied for the City of Riverside Down Payment Assistance Program. Every income statement of the applicant must be verified. Please indicate below the employee's current annual gross income from wages, overtime, bonuses, commissions, or any other form of compensation received on a regular basis.

Authorized Signature		Date
Authorized Employer Name (Please Print)		Title (Please Print)
I hereby certify that the ab	ove statements are true and	accurate to the best of my knowledge.
Total Current Income:	\$	
Other:	\$	
Commissions:	\$	
Bonuses:	\$	
Overtime:	\$	
Annual Gross Wages:	\$	
Employer to Complete:		



payment assistance funds to escrow. Property Information Form (DPA-5) - To be submitted Copy of Signed Sales Agreement, including all counter offers and Transfer Disclosure Statements Copy of recent Appraisal (within 60 days of executed Purchase Contract) Copy of Home Inspection Copy of 1008 or FHA Loan Underwriting Transmittal Summary (FLUTS) with underwriter's signature and date Copy of Standard Flood Hazard Determination (FEMA Form 81-93) or copy of FEMA website determination Homeownership Notice to Sellers and Disclosure of Information on Lead-Based Paint and Lead-Based Paint Hazards (DPA-6) with original, wet signature Copy of Escrow Instructions Copy of Complete Preliminary Title Report Copy of the Certificate(s) of Completion from a HUD certified Homebuyer Education course. (Buyers will be required to attend a Post Purchase Education course prior to the close of escrow.)

Part II. Once the client has located a property, please immediately the Property Information Form (DPA-5) immediately for property approval. If H&N staff approves the property, the applicant can then make an offer on the property and submit all the documentation listed below to H&N staff for review. If staff approves the property purchase, staff will issue loan documents and submit down



CITY OF RIVERSIDE, DEVELOPMENT DEPARTMENT

HOUSING & NEIGHBORHOODS DIVISION 3900 Main Street, 2nd Floor Riverside, CA 92522 (951) 826-5879 **Down Payment Assistance Program**

Property Information

Property Address:	
It is imperative that Seller, application and provide the	, Seller's or Buyer's agents are notified in advance of the time of following information:
Primary Contact:	
Secondary Contact:	
Does the property have a lo	ockbox? Yes No
If yes, will you provide acc	ess to H&N staff to inspect the house? Yes No
Type of property being pure. Is the home an REO or fore.	chased: Single Family Detached Planned Unit Development Condominium Manufactured Home (New Resale)
Name:	
Relationship-Check one Phone Number:	□Seller's Agent □Buyer's Agent □Lender Email Address:
Cell Number:	Email Madress.
	Number of Bathrooms:
Name:	
Relationship-Check one	□Seller's Agent □Buyer's Agent □Lender
Phone Number:	Email Address:
Cell Number:	
In-ground Pool/Spa 🔲 Y	es No
If yes, date of	Yes No of issuance of occupancy permit:



Property Information

Is the property vacant? Yes No
If Yes, Date Property Last Occupied:
Is the property occupied by the seller: Yes No
Is the property occupied by a tenant who is purchasing the property?: Yes No
Is the property occupied by a tenant who is not purchasing the property: Yes No
(If Yes, do not submit file. Properties that are currently tenant occupied and the tenant is not
purchasing the subject property are not eligible for DPA.)



City of Riverside, Development Department **Housing & Neighborhoods Division** 3900 Main Street, 2nd Floor Riverside, CA 92522 951-826-5879

HOMEOWNERSHIP NOTICE TO SELLERS

Name of Seller(s)		Name of Buyer(s)			
Pro	operty address located at:				
	fore a binding sales contract may be ove, the parties warrant that the follow	executed between the Seller(s) and the Buyer(s), as lising is true:	ted		
Sel	ler's Disclosure:				
1)	Seller(s) has/have been advised that to	ne property is being purchased with Federal assistance.			
2)	Seller(s) is/are voluntarily selling the property.				
3)		at the property is either seller occupied, being purchased t for at least ninety (90) days from the date of this letter.	by		
4)	Seller(s) has/have been advised that the Buyer(s) will apply to the City of Riverside Down Payment Assistance (DPA) Program for financial assistance in purchasing the Property, and that said assistance is <u>subject to both the Buyer(s)</u> and the Property qualifying for the DPA. Property must be in standard condition and ready for occupancy upon close of escrow, as determined by the DPA Program.				
5)	Property is presently (check one):	Occupied by Seller Occupied by Buyer			
		Occupied by Tenant Never Previously Occupied			
		Vacant – Last Date Occupied:			
		(month/year)			
	* The home must be vacant for at lea	st ninety (90) days prior to the purchase offer or the proper	ty		



is ineligible.

^{*} Verification of last date of occupancy must accompany DPA-6 to certify vacancy.

Disclosure of Information on Lead-Based Paint and Lead-Based Paint Hazards for Properties Constructed before 1978. <u>Answer and complete the following questions regardless of the age of the property being purchased.</u>

6) \$	Seller(s) Lead Based Paint Disclosure (Please initial):				
	(a) Presence of lead-based paint and/or lead-based paint hazards (check one below):				
		Is present in the property to be purchased (Please explain).			
		Seller has no knowledge of lead-based paint and/or lead-based paint hazards in the property to purchased.			
	(b) Reco	ords and reports available to the seller (check one below):			
		Seller has provided the Buyer with all available records and/or reports pertaining to lead-based paint and/or lead-based paint hazards in the property to be purchased (list all documents below):			
		Seller has no reports or records pertaining to lead-based paint and/or lead-based paint hazards in the property to be purchased.			
	stabil mutua is ren	er understands and acknowledges that the responsibility of any paint ization (treatment of defective paint) and/or lead hazard control is solely by all agreement between the Seller and Buyer. At a minimum, paint stabilization noval of the defective paint and repainting of the surface using Safe Work ces described in 24CFR 35.1350 and may be performed by a licensed painting actor.			
7) I	Buyer's Lea	d Based Paint Acknowledgement:			
	prope prope childr may reduct poison in res	Warning Statement. Every purchaser of any interest in residential real rty on which a residential dwelling was built prior to 1978 is notified that such rty may present exposure to lead from lead-based paint that may place young ren at risk of developing lead poisoning. Lead poisoning in young children produce permanent neurological damage, including learning disabilities, ed intelligence quotient, behavioral problems, and impaired memory. Lead ning also poses a particular risk to pregnant women. The seller of any interest idential real property is required to provide the buyer with any information on pased paint hazards from risk assessments or inspections in the seller's			

(b) <u>Visual Assessment for Lead Based Paint Compliance</u>. In each unit receiving down payment assistance through the Down Payment Assistance Program, all intact and non-intact interior and exterior surfaces must be inspected for presence of defective paint, i.e. cracking, scaling, chipping, peeling, or loose paint. This <u>visual assessment</u> will be required in addition to the Home Inspection Report at the Request for Funding

possession and notify the buyer of any known lead-based paint hazards.



	(c) Phase. Where defective paint is found, it must be treated to eliminate immediate hazards. At a minimum, treatment is removal of the defective paint and repainting of the surface.
	Buyer's Lead Based Paint Acknowledgment (Please initial):
applica	(d) Buyer has received copies of all information listed above in (b) above, if ble.
	(e) Buyer will receive the pamphlet <u>Protect Your Family from Lead in Your Home</u> (<u>available at www.epa.gov/lead/pubs/leadprot.htm</u>) upon verification of eligibility for the Down Payment Assistance Program and prior to close of escrow.
	(f) Buyer has (check one below):
	Exercised a 10-day option (or mutually agreed upon period) to request a risk assessment (\$300) or lead inspection/testing (\$400) conducted by a Risk Assessor certified under a State program authorized by the Environmental Protection Agency or for the presence of lead-based paint and/or lead based paint hazards at the Buyer's expense; or
	Waived the opportunity to request a risk assessment or inspection for the presence of lead-based paint and/or lead-based paint hazards.
	(g) Buyer understands and acknowledges that the responsibility of any paint stabilization (treatment of defective paint) and/or lead hazard control is solely by mutual agreement between the Seller and Buyer. At a minimum, paint stabilization is removal of the defective paint and repainting of the surface using Safe Work Practices described in 24 CFR 35.1350 and may be performed by a licensed painting contractor.
8) Coı	Interparts: This notice may be signed by the different parties hereto in counterparts, each of which shall be an original but all of which together shall constitute one and the same notice.



DPA-6 (2009/2010)

l,				the :	Seller(s), certify
that I / we have revie	ewed this notice a	and agree to the	above con	ditions regardi	ng the selling of
my/our	propert	ty	lo	cated	at
to the above-noted Assistance Program.	•	participating i	n the City	of Riverside	Down Payment
Signature of Seller				Dar	te
Signature of Seller			_	Da	ite
Signature of Seller				— Da	te
Signature of Seller's	Real Estate Age	nt	Date	_	

THIS NOTICE MUST BE ATTACHED TO THE PURCHASE AGREEMENT AND EXECUTED PRIOR TO OR CONCURRENT WITH SELLERS ACCEPTANCE OF PURCHASE OFFER. FAILURE TO DO SO WILL RESULT IN BUYERS DISQUALIFICATION FROM THE CITY OF RIVERSIDE DOWN PAYMENT ASSISTANCE PROGRAM.

